

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Handwritten initials]</i>	<i>12</i>	<i>09-06</i>
O.I.P.E. CLASSIFIER	<i>[Handwritten initials]</i>	<i>1124</i>	<i>9/12</i>
FORMALITY REVIEW	<i>[Handwritten initials]</i>		<i>10-4-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	6/27/04
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
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11	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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BEST AVAILABLE COPY